

● PRINTER RUSH ●
(PTO ASSISTANCE)

Application :	Examiner :	GAU :
10/002,399	Khare	1623
From:	Location:	Date:
MR	IDC FMF FDC	08-26-05
Tracking #:		Week Date:
06126610		07-25-05

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	02-14-05	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Original claim 94 now 9 depends upon original claim 88 now 13. Please correct dependency.	Thank you, MR
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[XRUSH] RESPONSE:
INITIALS:

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.